

Chronic Disease Connections

An e-bulletin created for healthcare systems working with patients to control their diabetes and high blood pressure.

Health Promotion is Newsworthy . . .

Health Care Became More Affordable from 2011 to Mid-2015



The cost of health care became more affordable from 2011 to the first half of 2015 as fewer people overall reported having trouble paying their medical bills, according to AHRQ's newly released [Chartbook on Care Affordability](#).

The percentage of people who reported trouble paying their medical bills decreased from 21 percent to 17 percent. This applied to people under age 65 of all income levels and race/ethnicity. However, blacks and Hispanics were more likely to have problems paying medical bills in all years as compared with whites. Find more chartbook details [here](#).

Access the [National Quality Strategy "Priorities In Focus" brief](#) that outlines current payment and delivery system reforms to make care more affordable.

Pre-diabetes and Diabetes News . . .

Providers: Please Take This IDPH Pre-Diabetes/Diabetes Survey

An estimated one in three adults have prediabetes, putting them at high risk for developing type 2 diabetes. About one in eleven people have diabetes – almost 10% of the population. 8.8% of Iowans have diabetes. With numbers like that, it's time to take action! As a primary care provider, you have been selected to participate in our diabetes prevention gap analysis survey. **The survey will take less than 10 minutes to complete.** Your input is invaluable to the progression of strengthening diabetes prevention and control services throughout the state! Information obtained from your feedback will be used to develop strategies and resources for use in strengthening diabetes prevention and control services within your community. Please click the link above to complete this survey by **Friday, September 30, 2016**. Thank you for your feedback!

Flu vaccine may confer reduced risk of cardiovascular disease in people with T2D, study indicates

The [New York Times](#) (7/27, Bakalar) "Well" blog reports that individuals with type 2 diabetes (T2D) "may get an added benefit from the flu vaccine: a reduced risk of cardiovascular disease," [research](#) published July 26 in the Canadian Medical Association Journal suggests. After following some 124,503 patients with T2D for seven years, then controlling for confounding factors, researchers found that individuals with T2D "who had gotten the flu vaccine had a 30 percent lower risk of stroke, a 22 percent lower risk of heart failure and a 24 percent lower risk of dying from all causes. They also had a slightly lower, but statistically insignificant, risk for heart attack."

New digital health initiative aims to reduce number of adults who develop type 2 diabetes

[HIT Consultant](#) (7/26) reports that "the American Medical Association (AMA), Omada Health, and Intermountain Healthcare" have "announced a digital health initiative aimed at reducing the alarming number of adults who develop type 2 diabetes." This "partnership will create a roadmap for large health care organizations across the country to adopt proven online behavior change interventions for at-risk patients, and integrate those programs into provider referral and clinical workflow." In a statement, AMA President Andrew W. Gurman, MD, said, "This collaboration expands upon the AMA's robust efforts to prevent type 2 diabetes in this country through the scalable adoption of proven innovative tools and resources that can help physicians better manage patients with chronic conditions." [MobiHealthNews](#) (7/26, Mack) reports that in the statement, Dr. Gurman said, "Research shows that participation in evidence-based diabetes prevention programs can cut the risk of developing type 2 diabetes by nearly 60 percent."



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Million Hearts® Initiative Update



Medicare to test population health approach in the management of cardiac care

Modern Healthcare (7/21, Dickson, Subscription Publication) reports CMS has chosen 516 practices to participate in a payment initiative, called the Million Hearts® Cardiovascular Disease Risk Reduction Model, to test population health approaches in the management of heart disease. The five-year effort will include “nearly 20,000 healthcare practitioners and more than 3.3 million Medicare fee-for-service beneficiaries” as participants. The innovative model will use predictive methods “to generate personalized risk scores and develop specific plans in partnership with patients to reduce the risk of having a heart attack or stroke.” Additionally, in order to identify successful prevention and population health interventions, the program will utilize a randomized controlled design.

The latest on the ABCS...

Aspirin Use



Are your patients using aspirin appropriately?

An excellent topic for patient education by the Care Manager or Health Coach.



Blood Pressure Control and Management



Issue Brief and Virtual Roundtable Summary on Identifying Undiagnosed Hypertension

To support the Million Hearts® focus of identifying people with undiagnosed – and therefore untreated – hypertension, NACDD and the CDC’s Division for Heart Disease and Stroke Prevention launched a series of learning opportunities in February 2016, including a fireside chat on the topic and two virtual roundtables to allow grantees to discuss their work related to undiagnosed hypertension, and an issue brief featuring strategies that state health departments have implemented.

The issue brief and summary of the virtual roundtables are now available!

AHA Scientific Statement: Salt Sensitivity of Blood Pressure

The American Heart Association (AHA) released a Scientific Statement on Salt Sensitivity of Blood Pressure (SSBP). The statement includes the historical perspective of SSBP and development in animal models, management of SSBP in humans, including the variability, reproducibility, assessment, and treatment options, and implications of SSBP for public health.

The Washington Post: Hypertension Is Now More Common In Poor And Middle-Income Countries Than Rich Ones

Middle- and lower-income countries now have a higher rate of hypertension than high-income countries. Worldwide, the prevalence of hypertension is at a record high, according to a new study in the journal *Circulation*. From 2000 to 2010, the rate of hypertension in middle- and lower-income countries increased by nearly eight percentage points. For higher-income countries in that same time period, it decreased by nearly three percentage points. (Beachum, 8/9)

Studies show evidence of heart benefits from omega-3s

TIME (7/18, Oaklander) examines the heart benefits of omega-3s in fish oil supplements, noting they are “the most popular natural product in America among U.S. adults,” eight percent of whom take them. Despite their popularity, the piece points out that experts’ research and conclusions about omega-3s’ purported heart benefits “have been surprisingly uneven.” However, a recent large study published in *JAMA Internal Medicine* led by researchers at Tufts University “added to the weight of evidence in favor of the fatty acids for heart health.” The study examined omega-3 levels in tissue and blood samples of 45,637 healthy people “to see if there was a connection to coronary heart disease.” While it did not find any link between heart attacks and omega-3s in general, it “did find that people who had diets rich in fish-derived omega-3s had a lower risk of fatal heart attacks.”

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Cholesterol Control and Management

The U.S. Preventive Services Task Force released a final recommendation statement on screening for lipid disorders in children and adolescents

The Task Force concludes that the current evidence is insufficient to assess the balance of benefits and harms of screening for lipid disorders in children and adolescents 20 years or younger.

Smoking Cessation

CDC: Smoking rates falling for nearly all racial and ethnic groups

The Washington Post (8/5, Kelly) reported the Centers for Disease Control and Prevention in a new study has found that since 2005, cigarette smoking among US adults has “continue[d] to slide among almost all racial and ethnic groups, but big disparities remain.” The study found that “only among Native Americans and Alaska Natives did the smoking rate rise between 2002-2005 and 2010-2013 – from 37.1 percent to 38.9 percent.” The CDC experts “attributed the continued decrease in most adult rates to the higher cost of tobacco products, advocacy campaigns and the promotion of smoking-cessation programs.” In a statement, however, Bridgette Garrett, associate director for health equity in the CDC’s Office on Smoking and Health, explained that “disparities remain among racial and ethnic groups and within subgroups.”



Plan Clinic Awareness Activities for Upcoming Health Observations:

September

Cholesterol Education Month

www.nhlbi.nih.gov



Healthy Aging Month

www.healthyaging.net

Farm Safety and Health Week

September 18-24

www.necasag.org

October

Talk About Your Medicine Month

www.talkaboutrx.org

Halloween Safety Month

www.geteyesmart.org

Health Literacy Month

www.healthliteracymonth.org

Pharmacists Month

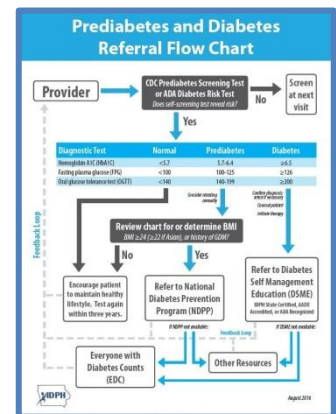
www.planetree.org



Now Available: Prediabetes/Diabetes Referral Flow Chart

The Iowa Department of Public Health has developed a new prediabetes and diabetes referral flow chart, for healthcare providers to use.

The flow chart encourages healthcare providers to screen adult patients for prediabetes and diabetes using the CDC Prediabetes Screening Test or the American Diabetes Association’s Diabetes Risk Test.



If a patient’s screening test score reveals a risk, providers are encouraged to test their patient for prediabetes and diabetes. The flow chart also describes various programs that are available to help patients that have prediabetes or diabetes.



The flow chart is available online at: <http://bit.ly/DiabetesFlowChart>.

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New Resources for Healthcare Providers

Advocacy News: Tracking patients between visits: A new care model

As the health care system transitions to value-based care, new models of care will be a critical part of the new Medicare payment system. Learn how one physician is using a new model of care to track patients in between face-to-face visits in his practice.

Health News: Physicians, patients take active approach to diabetes fight—online

A new project underway is creating a roadmap for large health care organizations to partner with their patients to fight off type 2 diabetes when they are most at risk of developing the disease. The program spurs patients to make the necessary behavioral changes and gives care teams the data they need to keep their patients healthy.

Practice News: From hospital to home: A model for safer transitions

Patients with multiple chronic conditions, polypharmacy and unmet social needs are often at risk for serious drug therapy problems during the transition from hospital to home. A new model has made these transitions safer and decreased hospital admissions and emergency department visits for patients.

View the recording, presentations and resources for the HI-5: Exploring Community-Wide Interventions That Have Health Impact in 5 Years Web Forum

This webinar took place on Tuesday, August 9, 2016. The Web Forum recording, presentations, and resources will be available on the Dialogue4Health website. If you have comments or questions, please contact your host, Dialogue4Health, at Dialogue4Health@phi.org.

Get Moving: High Physical-Activity Level Reduces Risk of 5 Diseases

High levels of physical activity can reduce the risk for five major diseases, including type 2 diabetes, new research shows. Findings from the systematic review and meta-analysis were published online August 9 in the *BMJ* by Hmwe H Kyu, PhD, of the University of Washington, Seattle, and colleagues. The data, from a total 174 studies comprising 149,184,285 total person-years of follow-up, suggest that the more total regular daily physical activity one engages in — including recreation, transportation, occupational activity, and/or daily chores — the lower the risks for breast cancer, colon cancer, diabetes, ischemic heart disease, and ischemic stroke. However, significant reductions in those conditions were seen only with total activity levels considerably higher than the minimum 600 metabolic equivalent (MET) minutes per week recommended by the World Health Organization for health benefits.

What's new about



Better Choices, Better Health
Put Life Back in Your Life

Chronic Disease Self-Management Programs work!

Your practice benefits from the use of an evidence-based program built upon more than 20 years of international experience. Well-designed clinical trials have shown that Chronic Disease Self-Management Programs such as Better Choices, Better Health produce statistically significant, sustained improvements in health behaviors, aerobic exercise, psychological health, and communication with physicians.

Learn more at <http://idph.iowa.gov/betterchoicesbetterhealth>.

The Iowa Department of Public Health -- Health Promotion and Chronic Disease Control Partnership



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